Labor O nization Officer speed and Em syee Report

U.S. Department of Labor

Employment Standards Administration Office of Labor-Management Standards

Office of LaborThis report is mandatory under P.L. 86-257, as amended. Failure to comply may result in
Priminal prosecution, fines and civil penalties as provided by 29 U.S.C. 439,440.

Form approved - OMB No. 1215-0188 Expires 11/30/2002

fiminal prosecution, fines and civil penalties as	provided by 29 U.S.C. 43	39,440.	Expires 11/30/2002
1. Name and address of person filing STEPHEN WADE RATHKE		2. Name and address of labor organization SEIU - LOCAL 100 574 35 8	
1024 ELYSIAN FIELDS AVENUE		1024 ELYSIAN FIR	ELDS AVENUE
EW ORLEANS, LA 70117		NEW ORLEANS, LA	
3. Position in labor organization 4. Date fiscal year CHIEF ORGANIZER 12/31/00		ended	5. File number (if assigned)
nter organizer nter appropriate data below if, during the past f		nouse or minor child directly	or indirectly had any of the following in-
rests (except as specified in the exclusions set t			or manestry had any or the following mi-
Held an interest in, engaged in transactions (in employer whose employees your organization			mic benefit of monetary value from an
Name of Employer		Address of Employer	
Nature of Interest, Transaction or Income			
Held an interest in or derived income or econon	nic henefit with monetary	value from a husiness (1) a	substantial part of which consists of buying
from, selling or leasing to, or otherwise dealing			
seeking to represent, or (2) any part of which c			r indirectly to, or otherwise dealing with your labor
organization or with a trust in which your labor	organization is interested		
Name of business		Address of business	
Business deals with-		10 If 9B or 9C is checked	d give trust or employer's name
Business deals with		To. II ob of oo is checken	a give tract of employer a finance
A. Labor Organization B. Trust	C. Employer		
. Nature and approximate dollar value of such de	alinas		
. Nature and approximate donar value of such de	aiirigs		
. Nature of interest held or income received			
Received from any employer (other than an en	nployer covered under p	earts A and B above) or from	any labor relations consultant to an employer
any payment of money or other thing of value			
. Name and address of employer X	or consultant	14. Nature of payment	
MERICAN INSTITUTE FOR SOCIAL J	USTICE, INC.	03/22/00 5.00	TRAVEL- STAFF
024 ELYSIAN FIELDS AVENUE		05/08/00 26.00	TRAVEL- STAFF
W ORLEANS, LA 70117		11/08/00 27.00	TRAVEL- STAFF
•			
IF MORE SPA	CE IS NEEDED AT	TACH ADDITIONAL SH	HEETS
Signature and verification - The undersigned of			
the attachments incorporated therein or referre	ed to in this report, has	been examined by him and is	, to the best of his knowledge and belief, true,

at NEW ORLEANS